

## TRANSACTION PRIVILEGE (SALES) AND USE TAX RETURN



City of Chandler  
Mail Stop 701  
PO Box 15001  
Chandler, AZ 85244-5001

Taxpayer Business Name  
Taxpayer Attention Line  
Taxpayer Address  
Taxpayer City/State/ZIP Code

|                               |   |
|-------------------------------|---|
| License No.                   | 1 |
| 100002000                     |   |
| Period Covered                |   |
| From To                       |   |
| 1/1/2001 1/31/2001            |   |
| Delinquent If Not Received By |   |
| 2/28/2001                     |   |
| Received                      |   |

Location Address: "Chandler City Location Prints Here"

## SPECIAL NOTICE

Just place a check here and sign at the bottom if you have no activity to file

THIS RETURN IS DUE ON THE 20TH OF THE MONTH

| Business Description  | Line | Business Class Code | Column 1<br>Gross | Column 2<br>- Deductions | Column 3<br>= Net Taxable | Column 4<br>x Tax Rate | Column 5<br>= Tax Amount |
|---|------|---------------------|-------------------|--------------------------|---------------------------|------------------------|--------------------------|
| Retail  | 1    | 17                  | 25,000.30         | 15,725.19                | 9,275.11                  | 1.50%                  | 139.13                   |
| Real Prop Rental  | 2    | 13                  | 5,500.65          | 573.89                   | 4,926.76                  | 1.50%                  | 73.90                    |
| Contracting   | 3    | 15                  | 15,000.00         | 8,790.60                 | 6,209.40                  | 1.50%                  | 93.14                    |
| Restaurant  | 4    | 11                  | 10,000.00         | 697.67                   | 9,302.33                  | 1.80%                  | 167.44                   |
| Use Taxable   | 5    | 99                  | 10,000.00         | 0.00                     | 10,000.00                 | 1.50%                  | 150.00                   |
| 6   |      |                     |                   |                          |                           |                        |                          |
| 7 TOTAL FROM ADDITIONAL PAGES                                       |      |                     |                   |                          |                           |                        |                          |
| 8   |      |                     |                   |                          |                           |                        |                          |
| 9   |      |                     |                   |                          |                           |                        |                          |
| 10  |      |                     |                   |                          |                           |                        |                          |
| 11  |      |                     |                   |                          |                           |                        |                          |
| 12  |      |                     |                   |                          |                           |                        |                          |
| 13 SUBTOTAL (Add Col. 5 Lines 1 Through 7)                          |      |                     |                   |                          |                           |                        |                          |
| 14 ENTER EXCESS CITY TAX COLLECTED                                  |      |                     |                   |                          |                           |                        |                          |
| 15 GRAND TOTAL (Add lines 8 plus 9)                                 |      |                     |                   |                          |                           |                        |                          |
| 16 PENALTY & INTEREST (see instructions on reverse)                 |      |                     |                   |                          |                           |                        |                          |
| 17 ENTER TOTAL LIABILITY (Add Lines 10 plus 11)                     |      |                     |                   |                          |                           |                        |                          |
| 18 ENTER CREDIT BALANCE TO BE APPLIED (Please attach A/R Statement) |      |                     |                   |                          |                           |                        |                          |
| 19 ENTER NET AMOUNT DUE   |      |                     |                   |                          |                           |                        |                          |
| 20 ENTER TOTAL AMOUNT PAID (Make check payable to City of Chandler) |      |                     |                   |                          |                           |                        |                          |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief it is true, correct and complete. Declaration of preparer (other than taxpayer) is based upon all information of which preparer has any knowledge.

Taxpayer's Signature

Date

Paid Preparer's Signature

Print Name

Phone #

Print Paid Preparer's Name

## A SIGNATURE IS REQUIRED TO MAKE THIS RETURN VALID

Return original with remittance in envelope provided.

Please make check payable to: CITY OF CHANDLER and list your License number on your check.

SAMPLE RETURN - PLEASE RETAIN FOR YOUR RECORDS

SEE REVERSE SIDE FOR STEP-BY-STEP INSTRUCTIONS

License No. 19

Report Period:

DUE DATE: Due date for the city privilege tax is the 20th of the month following the reporting period. A return is considered timely if received by the last business day of the month. A business day is any day except Saturday, Sunday or a legal City holiday.

## POSTMARKS ARE NOT EVIDENCE OF TIMELY FILING.

- PENALTIES:
1. Failure to File - A penalty of 5% of the tax due will be assessed for each month, or fraction elapsing between the delinquency date of the return and the date on which it is filed.
  2. Failure to Pay - A penalty of 10% of the unpaid tax will be assessed if the tax is not paid timely.
  3. Total Penalty - Total penalties assessed will not exceed 25%.

INTEREST: Taxes received after the delinquency date will be assessed interest at a rate of 1% per month until paid. The interest MAY NOT be abated by the Tax Collector.

| ALLOWABLE DEDUCTIONS BY BUSINESS ACTIVITY  |                 |                            |                 |                          |                                  |                 |                      |  |
|--|-----------------|----------------------------|-----------------|--------------------------|----------------------------------|-----------------|----------------------|--|
| Bus. Class Code  | Activity        | Allowed Ded.               | Bus. Class Code | Activity                 | Allowed Ded.                     | Bus. Class Code | Activity             | Allowed Ded.                             |
| 1  | Transportation  | 52, 64, 81                 | 12              | Amusement                | 52, 64, 81                       | 16              | Manufactured Housing | 52, 64, 75, 81                           |
| 4  | Utilities       | 52, 54, 64, 65, 81         | 13              | Rental of Real Property  | 52, 54, 64, 75, 81               | 17              | Retail Sales         | 52-59, 63-65, 73, 74, 75, 79, 81, 82, 83 |
| 5  | Telecomm.       | 52, 54, 64, 66, 81         | 14              | Rental Personal Property | 52-55, 58, 63-65, 73, 74, 75, 81 | 18              | Advertising          | 52, 64, 69, 81                           |
| 9  | Publishing      | 52, 54, 55, 64, 65, 69, 81 | 15              | Contracting              | 52, 62, 64, 70, 71, 75, 81       | 25/26           | Hotel/Motels         | 52, 64, 75, 81                           |
| 10   | Printing        | 52, 54, 55, 64, 65, 74, 81 |                 |                          |                                  | 49/99           | Jet Fuel/Use Tax     | None                                     |
| 11   | Restaurant /Bar | 52, 54, 64, 65, 74, 75, 81 |                 |                          |                                  |                 |                      |  |
| General tax rate is 1.5% except Business Class Code 11 = 1.8%, Code 25 = 4.4%, & Codes 4 & 5 = 2.75% |                 |                            |                 |                          |                                  |                 |                      |  |

SCHEDULE A - DETAILS OF DEDUCTIONS: Enter below the deductions and exclusions you used in computing your City transaction privilege or use tax. You must keep a detailed record of all deductions and exclusions. Failure to maintain proper documentation and records required by City Ordinance may result in their disallowance. A separate detail of city records and documentation must be maintained only when the income, deductions, or exemptions are different from state requirements. Please note: Not all deductions are available to all business classifications.

NOTE: The line numbers at the top of each column below correspond with the line numbers of the business descriptions listed on the front page.

| Deduction Description                          | Ded. Code | Business Class Code |              |              |              |              |                               |
|--|-----------|---------------------|--------------|--------------|--------------|--------------|-------------------------------|
|  |           | 17<br>LINE 1        | 13<br>LINE 2 | 15<br>LINE 3 | 11<br>LINE 4 | 99<br>LINE 5 | Business Class Code<br>LINE 6 |
| Discounts and Refunds                          | 52        |                     | 500.00       |              |              |              |                               |
| Sales for Resale                               | 54        |                     |              |              |              |              |                               |
| Out-of-State Sales                             | 55        |                     |              |              |              |              |                               |
| Prescriptions/Prosthetics                      | 58        |                     |              |              |              |              |                               |
| Gasoline & Use Fuel                            | 59        |                     |              |              |              |              |                               |
| Retail Labor                                   | 63        | 4,987.81            |              |              |              |              |                               |
| Tax Collected or Factored                      | 64        | 680.00              | 73.89        | 447.08       | 697.67       |              |                               |
| Qualifying Healthcare Sales                    | 65        | 57.38               |              |              |              |              |                               |
| Interstate Telecommunications                  | 66        |                     |              |              |              |              |                               |
| National Advertising                           | 69        |                     |              |              |              |              |                               |
| Exempt Capital Equipment                       | 73        | 10,000.00           |              |              |              |              |                               |
| Freight-Out/Delivery                           | 74        |                     |              |              |              |              |                               |
| Food Stamps/WIC                                | 79        |                     |              |              |              |              |                               |
| Bad debts on which tax was paid                | 81        |                     |              |              |              |              |                               |
| Trade-In Allowances                            | 82        |                     |              |              |              |              |                               |
| Mining Supplies                                | 83        |                     |              |              |              |              |                               |
| Other (explain)                                | 75        |                     |              |              |              |              |                               |
| Other (explain)                                | 75        |                     |              |              |              |              |                               |
| Other (explain)                                | 75        |                     |              |              |              |              |                               |
| SALES TO U.S. GOVERNMENT                       |           |                     |              |              |              |              |                               |
| By retailer (50% deductible)                   | 56        |                     |              |              |              |              |                               |
| By manufacturer and repairer (100% deductible) | 57        |                     |              |              |              |              |                               |
| CONSTRUCTION CONTRACTING                       |           |                     |              |              |              |              |                               |
| 35% reduction of gross receipts                | 70        |                     |              | 3,343.52     |              |              |                               |
| Exempt sub-contracting income                  | 71        |                     |              | 5,000.00     |              |              |                               |
| Out-of-City Contracting                        | 62        |                     |              |              |              |              |                               |
| Total Deductions (copy totals to front)        |           | \$15,725.19         | \$573.89     | \$8,790.60   | \$697.67     | \$0.00       | \$0.00                        |
| Speculative Builder Credit (for taxes paid)    | B         |                     |              |              |              |              |                               |

CHECK YOUR RETURN: Check the amounts recorded by type of income for each line item as follows.

- \* Itemized deductions equal the total deductions recorded.
- \* Taxable income equals gross income less total deductions.
- \* Tax due is equal to the amount obtained by applying the preprinted tax rate to the taxable income amount.
- \* Total tax due equals tax due plus any excess tax collected.

FOR ASSISTANCE, CALL: City of Chandler (480) 782-2280 Fax:(480) 782-2295